

### NJ HUMAN SERVICES CORONAVIRUS INFORMATION



# **b**g I am Deaf or Hard of Hearing **€**



I am using this card to communicate. I may need a certified sign language interpreter or captioning to communicate.

## Symptoms:









of Breath

## Travel recently by:









# Which country?



Was near a person who has COVID-19?



How long sick? (number of days)

> 2 3 4 5 6 7 8 9







Division of the Deaf and Hard of Hearing PO Box 074 Trenton, NJ 08625-0074 800-792-8339 Toll Free in New Jersey 609-588-2648 609-558-2528 Fax DDHH.communications2@dhs.state.nj.us

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6

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